

CENTRAL INTELLIGENCE AGENCY  
OFFICIAL ROUTING SLIP

| TO   |                  | INITIALS | DATE   |
|------|------------------|----------|--------|
| 1    | DEPUTY EXECUTIVE | IDS      | 6 Sept |
| 2    | Gen Counsel      |          |        |
| 3    |                  |          |        |
| 4    |                  |          |        |
| 5    |                  |          |        |
| FROM |                  |          | DATE   |
| 1    |                  |          | 9-2-49 |
| 2    |                  |          |        |
| 3    |                  |          |        |

|                                      |   |                                    |
|--------------------------------------|---|------------------------------------|
| <input type="checkbox"/> APPROVAL    | <input type="checkbox"/> INFORMATION          | <input type="checkbox"/> SIGNATURE |
| <input type="checkbox"/> ACTION      | <input type="checkbox"/> DIRECT REPLY         | <input type="checkbox"/> RETURN    |
| <input type="checkbox"/> COMMENT     | <input type="checkbox"/> PREPARATION OF REPLY | <input type="checkbox"/> DISPATCH  |
| <input type="checkbox"/> CONCURRENCE | <input type="checkbox"/> RECOMMENDATION       | <input type="checkbox"/> FILE      |

REMARKS:

Enclosed is self explanatory letter to Aetna Casualty and Surety Company and Special Release to be executed by you in regard to our claim against [redacted]

The attached file is forwarded for your reference. Please return to this office for our records.

SECRET CONFIDENTIAL RESTRICTED UNCLASSIFIED

FORM NO. 10